U.S.	D	epartm	ent	of	Jus	stice	
		States					ice

PROCESS RECEIPT AND RETURN
See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

			Y ·
PLAINTIFF 115A		COURT CASE NUMBER	R 10/29
DEFENDANT O & Fluma		TYPE OF PROCESS	
SERVE NAME OF INDIVIDUAL COMPANY. CORPORATION  ADDRESS (Street or RFD, Apartment No., City, State	tte	PTION OF PROPERTY TO	SEIZE OR CONDEMN
AT 25 East Ove 111e	0000 min 4	<b>2</b> A	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND A		r of process to be with this Form - 285	
1		r of parties to be in this case	
	Check on U.S	for service	
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASS Telephone Numbers, and Estimated Times Available For Service):  Fold  Output  Description:		•	Itemate Addresses, All Fold
Signature of Attorney or other Originator requesting service on behalf of:  SPACE BELOW FOR USE OF U.S. MARSHAI	☐ PLAINTIFF ☐ DEFENDANT	HONE NUMBER WRITE BELOV	DATE W THIS LINE
I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)  Total Process District of Origin to Serve	Signature of Authorized USN  Q: Lavel		Date 9/18
I hereby certify and return that I $\square$ have personally served, $\square$ have legal evidence on the individual, company, corporation, etc., at the address shown above or on the service of the			
☐ I hereby certify and return that I am unable to locate the individual, con	npany, corporation, etc., named	above (See remarks below	v)
Name and title of individual served (if not shown above)  Address (complete only if different than shown above)	FILED SCRANTON	cretion then res	nitable age and dis- iding in the defendant's abode.
(5)	OCT 2 5 2002	Signature of U.S./	Marshal or Deputy
Service Fee Total Mileage Charges (including endeavors) Forwarding Fee Total Charges	Advance Deposits Amount of	wed to U.S. Marshal or	Amount of Refund
Legal Run Acilio	9-18, 9-25	4-10-2-0	)